PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/598,517			ing Date 01/2006	To be Mailed
	Al	PPLICATION A	AS FILE	OTHER THAN SMALL ENTITY OR SMALL ENTITY							
⊢	FOR		NUMBER FILED		(Column 2) NUMBER EXTRA		RATE (\$)	FEE (\$)	<u> </u>	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	\neg	N/A		N/A	ı	N/A	1 == (4)	1	N/A	1 == (4)
	SEARCH FEE (37 CFR 1.16(k), (f),		N/A		N/A	1	N/A		ı	N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),	E	N/A		N/A	l	N/A		1	N/A	
	FAL CLAIMS CFR 1.16(i))		minus 20 =				x \$ =		OR	x \$ =	
IND	EPENDENT CLAIM CFR 1.16(h))	s	minus 3 = *			1	x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and drawin sheets of paper, the applicatio is \$250 (\$125 for small entity) additional 50 sheets or fraction 35 U.S.C. 41(a)(1)(G) and 37		n size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))									ı		
* If the difference in column 1 is less than zero, enter "0" in column 2.									ı	TOTAL	
APPLICATION AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY											
AMENDMENT	08/25/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.18())	· 27	Minus	 28	= 0		X \$26 =	0	OR	x s =	
	Independent (37 CFR 1,16(h))	• 6	Minus	 6	= 0		X \$110 =	0	OR	x s =	
	Application Size Fee (37 CFR 1.16(s))										
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
Г							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())		Minus		:	l	x \$ =		OR	x s =	
M	Independent (37 CFR 1,16(h))		Minus	***	:	1	x \$ =		OR	x s =	
	Application Size Fee (37 CFR 1.16(s))								1		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					l			OR		
Г									OR	TOTAL ADD'L FEE	
If the entry is column 1 is less than the entry in column 2, write "of in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "20". "If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3". "DONNA L. PRICE! The "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".											

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